



PTO/SB/21 (08-00)

## TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

Total Number of Pages in This Submission

Application Number	10/056,055
Filing Date	January 28, 2002
First Named Inventor	Osamu NAKAMURA et al.
Group Art Unit	2811
Examiner Name	D. Kang
Total Number of Pages in This Submission	Attorney Docket Number 0756-2428

**ENCLOSURES (check all that apply)**

<input checked="" type="checkbox"/> Fee Transmittal Form <input checked="" type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment / Reply <input checked="" type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Assignment Papers <i>(for an Application)</i> <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Declaration and Power of Attorney <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group <i>(Appeal Notice, Brief, Reply Brief)</i> <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosures 1. RCE 2. 3. 4. 5. 6.
<b>Remarks</b> <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge any additional fees required or credit any overpayments to Deposit Account No. 50-2280 for the above identified docket number.		

**SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT**

Firm or Individual name	Eric J. Robinson, Reg. No. 38,285 Robinson Intellectual Property Law Office, P.C. PMB 955 21010 Southbank Street Potomac Falls, VA 20165
Signature	
Date	December 1, 2004

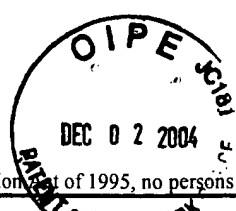
**CERTIFICATE OF MAILING**

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Type or printed name	Adele Stamper		
Signature		Date	December 1, 2004

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# FEE TRANSMITTAL FOR FY 2005

Effective 10/01/2004. Patent fees are subject to annual revision.

 Applicant Claims small entity status. See 37 CFR 1.27.

TOTAL AMOUNT OF PAYMENT (\$ 1038.00)

Complete if Known

Application Number	10/056,055
Filing Date	January 28, 2002
First Named Inventor	Osamu NAKAMURA et al.
Examiner Name	D. Kang
Group Art Unit	2811
Attorney Docket No.	0756-2428

## METHOD OF PAYMENT

1.  The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to:

Deposit Account Number

50-2280

Deposit Account Name

Robinson Intellectual Property Law Office

- Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17 and credit overpayments

- Applicant claims small entity status. See 37 CFR 1.27

2.  Payment Enclosed:

- Check  Credit Card  Money Order  Other

## FEE CALCULATION

## 1. BASIC FILING FEE

Large Entity Fee Code	Small Entity Fee Code	Fee Description	Fee Paid
1001	790	2001 395 Utility filing fee	
1002	350	2002 175 Design filing fee	
1003	550	2003 275 Plant filing fee	
1004	790	2004 395 Reissue filing fee	
1005	160	2005 80 Provisional filing fee	

SUBTOTAL (1) (\$)

## 2. EXTRA CLAIM FEES

		Extra Claims	Fee from below	Fee Paid
Total Claims	87	-83** =	4 X \$18	\$ 72
Independent Claims	15	-13** =	2 X \$88	\$ 176
Multiple Dependent				

Large Entity Fee Code	Small Entity Fee Code	Fee Description (\$)	Fee Paid
1202	18	2202 9 Claims in excess of 20	
1201	88	2201 44 Independent claims in excess of 3	
1203	300	2203 150 Multiple dependent claim, if not paid	
1204	88	2204 44 ** Reissue independent claims over original patent	
1205	18	2205 9 ** Reissue claims in excess of 20 and over original patent	

SUBTOTAL (2) (\$ 248.00)

## FEE CALCULATION (continued)

## 3. ADDITIONAL FEES

Fee Code	Large Entity Fee (\$)	Small Entity Fee Code (\$)	Fee Description	Fee Paid
1051	130	2051	65 Surcharge - late filing fee or oath	
1052	50	2052	25 Surcharge - late provisional filing fee or cover sheet	
1053	130	1053	130 Non-English specification	
1812	2,520	1812	2,520 For filing a request for <i>ex parte</i> reexamination	
1804	920*	1804	920* Requesting publication of SIR prior to Examiner action	
1805	1,840*	1805	1,840* Requesting publication of SIR after Examiner action	
1251	110	2251	55 Extension for reply within first month	
1252	430	2252	215 Extension for reply within second month	
1253	980	2253	490 Extension for reply within third month	
1254	1,530	2254	765 Extension for reply within fourth month	
1255	2,080	2255	1040 Extension for reply within fifth month	
1401	340	2401	170 Notice of Appeal	
1402	340	2402	170 Filing a brief in support of an appeal	
1403	300	2403	150 Request for oral hearing	
1451	1,510	1451	1,510 Petition to institute a public use proceeding	
1452	110	2452	55 Petition to revive - unavoidable	
1453	1,370	2453	685 Petition to revive - unintentional	
1501	1,370	2501	685 Utility issue fee (or reissue)	
1502	490	2502	245 Design issue fee	
1503	660	2503	330 Plant issue fee	
1460	130	1460	130 Petitions to the Commissioner	
1807	50	1807	50 Processing fee under 37 CFR 1.17(q)	
1806	180	1806	180 Submission of Information Disclosure Stmt	
8021	40	8021	40 Recording each patent assignment per property (times number of properties)	
1809	790	2809	395 Filing a submission after final rejection (37 CFR § 1.129(a))	
1810	790	2810	395 For each additional invention to be examined (37 CFR § 1.29(b))	
1801	790	2801	395 Request for Continued Examination (RCE)	\$790
1802	900	1802	900 Request for expedited examination of a design application	

Other fee (specify) \_\_\_\_\_

\* Reduced by Basic Filing Fee Paid

SUBTOTAL (3)

(\$ 790.00)

## CERTIFICATE OF MAILING

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## SUBMITTED BY

Complete (if applicable)

Name (Print/Type)	Eric J. Robinson	Registration No. (Attorney/Agent)	38,285	Telephone	(571) 434-6789
Signature	<i>[Signature]</i>			Date	12-01-04